



Serial No.: 09/943,919

Inventor(s): Li

U.S. PTO Customer No. 25280

Case No.: 5312

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Li, et al.
Serial Number: 09/943,919
Filed: August 31, 2001
For: Printed Textile Substrate
Group Art Unit: 1774
Examiner: Shewareged, B.

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

Sir:

Certificate of Express Mailing Under 37 CFR §1.10

I hereby certify that this correspondence, and all correspondence referenced herein is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" with a Mailing Label Number listed below in an envelope addressed to "Commissioner for Patents, PO Box 1450, Alexandria VA 22313-1450" with sufficient postage on the date listed below:

Express Mail Label No.: EL 992173360 US

Date: August 24, 2004

Name: Heidi M. Lewis

Signature: Heidi M. Lewis

RESPONSE TO OFFICE ACTION

In response to the Office Action dated February 25, 2004, Applicant submits the attached Amendments to the Claims and Remarks.

Applicant respectfully submits that this Response and its attachments addresses all of the rejections, objections, and comments in the latest Office Action, and respectfully requests reconsideration and allowance of the pending claims in view of this Response. Applicant respectfully submits that the amendments submitted herewith do not add new matter to the application. In the event that the Examiner believes that the claims would be allowable with minor changes, the Examiner is invited to telephone the undersigned to discuss an Examiner's Amendment.

Fee Authorization: Applicant has changed the total independent claims from a total of five (5) previously paid for, to a new total of nine (9). The Commissioner is hereby authorized to withdraw the fees for the additional four (4) claims from our Deposit Account No. 04-0500. In the event that there are additional fees associated with the submission of these papers, Applicant hereby authorizes the Commissioner to withdraw those fees from our Deposit Account No. 04-0500.

Extension of Time: In the event that additional time is required to have the papers submitted herewith for the above referenced application to be considered timely, Applicant hereby petitions for any additional time required to make these papers timely and authorization is hereby granted to withdraw any additional fees necessary for this additional time from our Deposit Account No. 04-0500.

Respectfully Submitted,

Jeffrey E. Bacon
Reg. No. 35,055

Legal Dept. (M495)
920 Milliken Road
Spartanburg, SC 29303
(864) 503-1160

09/07/2004 ASELLEN 00000003 040500 09943919
01 FC:1201 72.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09/943419

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	2	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	2 minus 20=	*
INDEPENDENT CLAIMS	2 minus 3=	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	51	Minus .. 20	= 31
Independent	4	Minus ... 3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	FEE
BASIC FEE	710.00
X\$18=	
X80=	
+270=	
TOTAL	710

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	558
X80=	336
+270=	
TOTAL ADDIT. FEE	894

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	9	Minus .. 31	= 22
Independent	9	Minus ... 7	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	122
+270=	
TOTAL ADDIT. FEE	122

BEST AVAILABLE COPY

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus ..	=
Independent	*	Minus ...	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.